<010> Study Area Code 119003 <015> Study Area Name Virgin Mobile USA 1.P <020> Program Year 2015 <030> Contact Name - Person USAC should contact regarding this data Andrew M. Lancaster <035> Contact Telephone Number - Number of person identified in data line <030> 9137624107 ext. <039> Contact Email Address - Email Address of person identified in data line <030> andy.m. lancaster@sprint.com <1210> Terms & Conditions of Voice Telephony Lifeline Plans Name of Attached Document <1220> Link to Public Website HTTP http://www.assurancewireless.com/Public/TermsandConditions.aspx	86/ON4B Control No. 3050-0819
<015> Study Area Name <020> Program Year <030> Contact Name - Person USAC should contact regarding this data <035> Contact Telephone Number - Number of person identified in data line <030> \$137626107 ext. <039> Contact Email Address - Email Address of person identified in data line <030> andy.m. lancaster@sprint.com <1210> Terms & Conditions of Voice Telephony Lifeline Plans Name of Attached Document <1220> Link to Public Website HTTP http://www.assurancewireless.com/Public/TermsandConditions.aspx	
<020> Program Year <030> Contact Name - Person USAC should contact regarding this data <035> Contact Telephone Number - Number of person identified in data line <030> <039> Contact Email Address - Email Address of person identified in data line <030> andy.m.ianosaterasprint.com <1210> Terms & Conditions of Voice Telephony Lifeline Plans Name of Attached Document <1220> Link to Public Website HTTP http://www.assurancewireless.com/Public/TermsandConditions.aspx	
<030> Contact Name - Person USAC should contact regarding this data <035> Contact Telephone Number - Number of person identified in data line <030> <039> Contact Email Address - Email Address of person identified in data line <030> <1210> Terms & Conditions of Voice Telephony Lifeline Plans Name of Attached Document <1220> Link to Public Website HTTP http://www.assurancewireless.com/Public/TermsandConditions.aspx	
<035> Contact Telephone Number - Number of person identified in data line <030> 9137626107 ext. andy.m. Lancasterasprint.com <1210> Terms & Conditions of Voice Telephony Lifeline Plans Name of Attached Document <1220> Link to Public Website HTTP http://www.assurancewireless.com/Public/TermsandConditions.aspx	
<039> Contact Email Address - Email Address of person identified in data line <030> andy.m.iancesterasprint.com <1210> Terms & Conditions of Voice Telephony Lifeline Plans Name of Attached Document <1220> Link to Public Website HTTP http://www.assurancewireless.com/Public/TermsandConditions.aspx	
Name of Attached Document Link to Public Website HTTP http://www.assurancewireless.com/Public/TermsandConditions.aspx	
<1220> Link to Public Website HTTP http://www.assurancewireless.com/Public/TermsandConditions.aspx	
TITE DELETION ABBUTANCEWIFELDS.COM/FUDISC/IETMEANACONALELONA.espx	
27 1 70 1 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
"Please check these boxes below to confirm that the attached document(s), on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:	
<1221> Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,	
<1222> Details on the number of minutes provided as part of the plan,	
<1223> Additional charges for toll calls, and rates for each such plan.	
	8.

Data Col	ice Cap Carrier Additional Documentation ection form		FCC Form 481 OMS Control No. 3060-0385/ONS Control No. 3060-0819 Suly 2013
including	Rate-of-Return Carriers affiliated with Price Cap Local Exchange Confers	Action 2 Miles Brook - The Late Control	AUT EULS
<010>	Study Area Code	119003	
<015>	Study Area Name	Virgin Mobile USA LP	
<020>	Program Year	2015	
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster	
<035>	Contact Telephone Number - Number of person identified in data line <030>	9137626107 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	andy,m.lancaster@sprint.com	
CHECK to	te baxes below to note compliance as a recipient of Incremental Connect Ameri support as set forth in 47 CFR § 54.313(b),(c),(d),(d	[10] [16] [16] [16] [17] [17] [18] [18] [18] [18] [18] [18] [18] [18	gh Cost support to offset access charge reductions, and Connect America Phase II the documents attached below is accurate.
	Incremental Connect America Phase I reporting		
<2010>	2nd Year Certification (47 CFR § 54.313(b)(1))		
<2011>	3rd Year Certification (47 CFR § S4.313(b)(2))		
	Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.312(a))		
<2012>	2013 Frozen Support Certification		
<2013>	2014 Frozen Support Certification		
<2014>	2015 Frozen Support Certification		
<2015>	2016 and future Frozen Support Certification		
	Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d))		
<2016>	Certification Support Used to Build Broadband		
	Connect America Phase II Reporting (47 CFR § 54.313(e))		
<2017>	3rd year Broadband Service Certification		
<2018>	5th year Broadband Service Certification		
<2019>	Interim Progress Certification		
<2020>	Please check the box to confirm that the attached document(s), on i pursuant to § 54.313 (e)(3)(iii), as a recipient of CAF Phase II support addresses of community anchor institutions to which began providir preceding calendar year.	shall provide the number, names, and	
<2021>	Interim Progress Community Anchor Institutions		
		1	ı
			strached Document Listing Required Information

5000E E	lats Of Beturn Carrier Additional Documentation	FCC Form AEC
	Section Form	CNMS Corpus No. 2060-0986/OMS Control No. 2060-0819
		109 2013
<010>	Study Area Code	119003
<015>	Study Area Name	Virgin Mobile USA LP
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data Contact Telephone Number - Number of person identified in data line <030>	Andrew M. Lancaster
<039>	Contact Email Address - Email Address of person identified in data line <030>	9137626107 ext. andv.m.lancaster@sprint.com
CHECK		nt to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring compliance with the financial reporting requirements set forth in 4
		he information reported on this form and in the documents attached below is accurate.
		1
(3010)	Progress Report on S Year Plan	
	Milestone Certification (47 CFR § 54.313(f)(1)(i))	
		Name of Attached Document Listing Required Information
	Please check this box to confirm that the attached document(s), on line	3012 contains the required information pursuant to
(3011)	§ 54.313 (f)(1)(ii), the carrier shall provide the number, names, and addr providing access to broadband service in the preceding calendar year.	esses of community anchor institutions to which began
(3012)	Community Anchor Institutions (47 CFR § 54.313(f)(1)(ii))	
		Name of Attached Document Listing Required Information
	is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2)) If yes, does your company file the RUS annual report	(Yes/No)
	and the state of the second of	200
Please	check these boxes to confirm that the attached document(s), on line 301	 contains the required information pursuant to § 54.313(f)(2) compliance requires:
(3015)	Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)	
(3016)	Document(s) for Balance Sheet, Income Statement and Statement of Ca	ash Flows
(3017)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation	
	40	Name of Attached Document Listing Required Information
(3018)	If the response is no on line 3014, is your company audited?	(Yes/No) (QIQ)
	If the response is yes on line 3018, please check the boxes below to	
(3019)	confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains	
(2013)	Either a copy of their audited financial statement; or (2) a financial report in a f	ormat comparable to RUS Operating Report for Telecommunications
(3020)	Document(s) for Balance Sheet, Income Statement and Statement of C	ash Flows
(3021)	Management letter issued by the independent certified public accountant that	performed the company's financial audit.
	If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:	
(3022)	Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a	
	format comparable to RUS Operating Report for Telecommunications Borrowers.	
(3023)	Underlying information subjected to a review by an independent certified	
(3023)	public accountant	F
(3024)	Underlying information subjected to an officer certification.	⊢
(3025)	Document(s) for Balance Sheet, Income Statement and Statement of Ca	ash Flows
20000-1	1	
[3026]	Attach the worksheet listing required information	
	I	The state of the s
		Name of Attached Document Listing Required Information

COUNTY SEE CONTINUE	tion - Reporting Carrier lection Ferm	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	119003
<015>	Study Area Name	Virgin Mobile USA LP
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster
4025	Contact Talanhara Number Number of passes identified in data line (020)	9137626107 ext

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

<039> Contact Email Address - Email Address of person identified in data line <030> andy.m.lancaster@sprint.com

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate. Name of Reporting Carrier: Virgin Mobile USA LP Signature of Authorized Officer: CERTIFIED ONLINE Date 06/10/2014 Printed name of Authorized Officer: Jay Franklin Title or position of Authorized Officer: 9137625987 ext. Study Area Code of Reporting Carrier: 119003 Filling Due Date for this form: 06/30/2014 Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

\$1000000000000000000000000000000000000	Non - Agent / Carrier lection Form	FCC Form 481 CM6 Control No. 3060-0986/CMB Control No. 3060-0819 July 2013
<010>	Study Area Code	119003
<015>	Study Area Name	Virgin Mobile USA LP
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster
<035>	Contact Telephone Number - Number of person identified in data line <030>	9137626107 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	andy.m.lancaster@sprint.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

I certify that (Name of Agent)	ls authorized to submit the information reported on behalf of the reporting	carrier.		
also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.				
Name of Authorized Agent:				
Name of Reporting Carrier:				
Signature of Authorized Officer:	Date:			
Printed name of Authorized Officer:				
Title or position of Authorized Officer:				
Telephone number of Authorized Officer:				
Study Area Code of Reporting Carrier:	Filing Due Date for this form:			

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier				
할 것이다. 프로그램 그리고요 하는 아픈데 보고 의통하는 아이는 화가를 하고 있다. 그리고 하고 있다.	rized to submit the annual reports for universal service support recipient eporting carrier; and, to the best of my knowledge, the information reports	이 사고 있는 것이 없는 사람들은 이 없었다. 아무리 그 사람들은 이 없는 것이 되었다.		
Name of Reporting Carrier:				
Name of Authorized Agent or Employee of Agent:				
Signature of Authorized Agent or Employee of Agent:		Date:		
Printed name of Authorized Agent or Employee of Agent:				
Fitle or position of Authorized Agent or Employee of Agent	7. 7. 2.10			
Telephone number of Authorized Agent or Employee of Ag	nt:			
Study Area Code of Reporting Carrier:	Filing Due Date for this form:			



11/2 15 10/200	erating Companies action Form		FCC Form 481 OMI6 Centrol No. 3660-0986/OMB Control No. 3060-0819 July 2013
nine sami	Million and the service and the service and		
<010>	Study Area Code		11900)
<015>	Study Area Name		Virgin Mobile USA LP
<020>	Program Year		2015
<030>	Contact Name - Person (ISAC should contact regarding this data	Andrew M. Lancaster
<035>	Contact Telephone Num	ber - Number of person identified in data line <030>	9137628107 ext.
<039>	Contact Email Address -	Email Address of person identified in data line <030>	andy.m.lancaster@sprint.com
<810>	Reporting Carrier	Virgin Mobile USA LP	
<811>	Holding Company	Softbank Corp	
<812>	Operating Company		

Affiliates	SAC	Doing Business As Company or Brand Designation
Virgin Mobile USA LP	119003	Assurance Wireless
1000		
10 10 10 10 10 10 10 10 10 10 10 10 10 1		
	The second secon	and the same control are



FCC For	m 481 - Carrier Annual Reporting			ntral No. 3060-0986/OMB Control No. 3060-0819
	Data Collection Form		Tuly 2013	
<010>	Study Area Name	Virgin Mobile USA	I.D.	
<015>	Study Area Name		ш	
<020>	Program Year Contact Name: Person USAC should contact	2015		
<030>	Contact Name: Person USAC should contact with questions about this data	Andrew M. Lancaster	_	
<035>	Contact Telephone Number: Number of the person identified in data line <030>	9137626107 ext.		
<039>	Contact Email Address: Email of the person identified in data line <030>	andy.m.lancaster@sp	rint.com	
				54.313 54.422
ANNUA	L REPORTING FOR ALL CARRIERS			Completion Completion Required Required (check box when complete)
<100>	Service Quality Improvement Reporting		(complete attached worksheet)	111111
<200>	Outage Reporting (voice)		(complete attached worksheet)	
<210>	< check box if no	outages to report		
<300>	Unfulfilled Service Requests (voice)			
<310s	Detail on Attempts (voice)			
13102	betall of Attempts (Voice)			The same same same
		74,	(attaci	h descriptive document)
-220s	Unfulfilled Service Peruants (broadband)			THE STATE OF THE S
<320>	Unfulfilled Service Requests (broadband)		27 Maria (1912) 1914	
<330>	Detail on Attempts (broadband)		0.00	
			. (atta	ch descriptive document)
<400>	Number of Complaints per 1,000 customers (voice)		1	
<410>	Fixed			
<420>	Mobile			
	Number of Complaints per 1,000 customers (broads	pand)		
<440> <450>	Fixed Mobile			The second of th
<500>	Service Quality Standards & Consumer Protection R	ules Compliance	(check to indicate certification)	
			1	
<510>	1		(attached descriptive documen	ot)
]	
<600>	Functionality in Emergency Situations		(check to indicate certification)	
			(attached descriptive document)	
<610>				
<700>	Company Price Offerings (voice)		(complete attached worksheet)	
<710>	Company Price Offerings (broadband)		(complete attached worksheet)	
	Operating Companies and Affiliates		(complete attached worksheet)	
	Tribal Land Offerings (Y/N)?	(if:	yes, complete attached worksheet)	
<1000>	Voice Services Rate Comparability	-7-20	(check to indicate certification)	22222
<1010>	*		(attach descriptive document)	
4400				122222
<1100>	Terrestrial Backhaul (Y/N)?	(i)	not, check to indicate certification)	
<1110>			(complete attached worksheet)	Allen
<1200>	Terms and Condition for Lifeline Customers		(complete attached worksheet)	
	Price Cap Carriers, Proceed to Price Cap Additional			
<2000>	Including Rate-of-Return Carriers affiliated with Pr	ice cup Local Exchange	(check to indicate certification)	
<2005>			(complete attached worksheet)	
	Rate of Return Carriers, Proceed to ROR Additional	Documentation Work		
<3000> <3005>			(check to indicate certification) (complete attached worksheet)	

	rvice Quality improvement Reporting llection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	109010	
<015>	Study Area Name	Virgin Mobile USA LP	
<020>	Program Year	2015	- 1928 1924 - 1924
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster	
<035>	Contact Telephone Number - Number of person identified in data line <030>	9137626107 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	andy.m.lancaster@sprint.com	<u> </u>
<110>	Has your company received its ETC certification from the FCC?	(yes/no) O	
<111>	If your answer to Line <110> is yes, do you have an existing \$54.202(a) "5 year plan" filed with the FCC?	(yes/no) O O	
	If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.		
<112>	Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your of CETC which only receives frozen support, your progress report is only	ompany is a	*
	required to address voice telephony service.		
	Please check these boxes below to confirm that the attached documents(s), on lit 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.	ine .	Name of Attached Document
<113>	Maps detailing progress towards meeting plan targets		
<114>	Report how much universal service (USF) support was received		
<115>	How (USF) was used to improve service quality		
<116>	How (USF)was used to improve service coverage		
<117>	How (USF) was used to improve service capacity		
<118>	Provide an explanation of network improvement targets not met in the prior calendar year.		

Data Collection Form OMB Control No. 3060-0985/OM8 July 2013	ontrol No. 3060-0819

<010>	Study Area Code	109010
<015>	Study Area Name	Virgin Mobile USA LP
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster
<035>	Contact Telephone Number - Number of person identified in data line <030>	9137626107 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	andy.m.lancaster@sprint.com

<220>

<a>>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<<1>	<c2></c2>	<d></d>	<e></e>	<f></f>	<g></g>	<h>></h>
NORS Reference Number	Outage Start Date	Outage Start Time	Outage End Date	Outage End Time	Number of Customers Affected	Total Number of Customers	911 Facilities Affected (Yes / No)	Service Outage Description (Check all that apply)	Did This Outage Affect Multiple Study Areas (Yes / No)	Service Outage Resolution	Preventative Procedures
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PROGRESS NAME OF	ce Offerings Including Voice Rate Data lection form	FCC Form 481 OMS Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	109010
<015>	Study Area Name	Virgin Mobile USA LP
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster
<035>	Contact Telephone Number - Number of person identified in data line <030>	9137626107 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	andy.m.lancaster@sprint.com
<701> <702>	Residential Local Service Charge Effective Date 1/1/2014 Single State-wide Residential Local Service Charge	

State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fee
					-			
							110.7	VS-VS-222
7								
2772						1.07104		
	-						17 17 2	-
							2330	
	 		VS-11-1-1-1-1-1-1					
						7. 110.		

	section of Frice Offerings	SCC form 481 OMIX Control No. 3060 0985 (OMIX Control No. 3050 0919
Cata Col	action form	Self 2013
<010>	Study Area Code	109010
<015>	Study Area Name	Virgin Mobile USA LP
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster
<035>	Contact Telephone Number - Number of person identified in data line <030>	9137626107 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	andy.m.lancaster@sprint.com

qb o	42	dila	<62>	«»	<63>	(62)	- db	dla
State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached (select
	72							
					<u> </u>		S-	
	2 0 2 3 0 0 2 2 3 0 0 0 0 0 0 0 0 0 0 0							
	183						-	

	erating Companies ection Form			FCC Form 481 Onf8 Control No. 2060-0986/OMB Control No. 2060-0819 July 2013	Self-Caldady Page
<010>	Study Area Code	109010			
<015>	Study Area Name	Virgin Mobile	ffsa f.P		_
<020>	Program Year	2015	- XXX		_
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lan	caster		7
<035>	Contact Telephone Number - Number of person identified in data line <030>	9137626107 ex	t.		
<039>	Contact Email Address - Email Address of person identified in data line <030>	andy.m.lancas	ter@sprint.com		_
<810>	Reporting Carrier Virgin Mobile USA LP		_		
<811>	Holding Company Softbank Corp.				
<812>	Operating Company				_
<813>	(a)		42>	33>	- Lane
	Affiliates		SAC	Doing Business As Company or Brand Designation	
- 1					
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		37 %	F/2 /0 1/3		•
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100000000000000000000000000000000000000	ael Lands Reporting ection Form	FCCForm #81 OMB Control No. 3050-0955/OMB Control No. 3050- July 2013	0819
010>	Study Area Code	109010	
15>	Study Area Name	Virgin Mobile USA LF	
20>	Program Year	2015	
30>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster	
35>	Contact Telephone Number - Number of person identified in data line <030		
39>	Contact Email Address - Email Address of person identified in data line <030	O> andy.m.lancaster@sprint.com	
910>	Tribal Land(s) on which ETC Serves		
920>	Tribal Government Engagement Obligation	Name of Attached Document	
vour c	ompany serves Tribal lands, please select (Yes,No, NA) for each these boxes		
	rm the status described on the attached document(s), on line 920,		
		Select	
	B(a)(9) includes:	Yes,No,	
		NA)	
21>	Needs assessment and deployment planning with a focus on Tribal		
	[10] [2] (10] [2] (10] [2] (10] (10] (10] (10] (10] (10] (10] (10		
22>	Feasibility and sustainability planning;		
23>	Marketing services in a culturally sensitive manner;		
24>	Compliance with Rights of way processes	;	
25>	Compliance with Land Use permitting requirements		
26>	Compliance with Facilities Siting rules		
27>	Compliance with Environmental Review processes		
28>	Compliance with Cultural Preservation review processes		
29>	Compliance with Tribal Business and Licensing requirements.		

PARTY STATES OF THE PARTY OF TH	Terrestrial Backhaul Reporting ection Form		FCC Form 481 DMB Control No. 3060-9986/DMB Control No. 3060-0819 July 2013
<010>	Study Area Code	109010	
<015>	Study Area Name	Virgin Mobile USA LP	
<020>	Program Year	2015	
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster	
<035>	Contact Telephone Number - Number of person identified in data line <030>	9137626107 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	andy.m.lancaster@sprint.com	
<1120>	Please check this box to confirm no terrestrial backhaul options exist within the supported area pursuant to § 54.313(G)		
<1130>	Please check this box to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(G)		

<010>		July 2013
-010-	Study Area Code	109010
<015>	Study Area Name	Virgin Mobile USA LP
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster
<035>	Contact Telephone Number - Number of person identified in data line <030>	9137626107 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	andy.m.lancaster@sprint.com
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans	
	<u>.</u>	Name of Attached Document
<1220>	Link to Public Website HTTP h	ttp://www.assurancewireless.com/Public/TermsandConditions.aspx
or the we	heck these boxes below to confirm that the attached document(s), on line 1210, obsite listed, on line 1220, contains the required information pursuant to (a)(2) annual reporting for ETCs receiving low-income support, carriers must report:	
<1221>	Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,	
<1222>	Details on the number of minutes provided as part of the plan,	
	Additional aboves footall calls and outsides each such also	
<1223>	Additional charges for toll calls, and rates for each such plan.	

(2000) P	rice Cap Carrier Additional Documentation		V FCC Form 481
Data Col	lection Form	Service Constitution (Co. Co. Co. Co. Co. Co. Co. Co. Co. Co.	OMB Control No. 3060-0986/OM8 Control No. 3060-0819
including	Rute-of-Return Conters affiliated with Price Cap Local Exchange Corners		July 2013
<010>	Study Area Code	109010	
<015>	Study Area Name	Virgin Mobile USA LP	
<020>	Program Year	2015	
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster	
<035>	Contact Telephone Number - Number of person identified in data line <030>	9137626107 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	andy.m.lancasterwsprint.com	
CHECK to	he boxes below to note compliance as a recipient of incremental Connect Amer support as set forth in 47 CFR § 54.313(b),(c),(d),(th Cost support to offset access charge reductions, and Connect America Phase II the documents attached below is accurate.
	Incremental Connect America Phase I reporting		
<2010>	2nd Year Certification (47 CFR § 54.313(b)(1))		
<2011>	3rd Year Certification (47 CFR § 54.313(b)(2))		
	Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.312(a))		_
<2012>	2013 Frozen Support Certification		
<2013>	2014 Frozen Support Certification		
<2014>	2015 Frozen Support Certification		
<2015>	2016 and future Frozen Support Certification		
	Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d))		
<2016>	Certification Support Used to Build Broadband		
	Connect America Phase II Reporting (47 CFR § 54.313(e))		
<2017>	3rd year Broadband Service Certification		
<2018>	5th year Broadband Service Certification		
<2019>	Interim Progress Certification		
<2020>	Please check the box to confirm that the attached document(s), on pursuant to § 54.313 (e)(3)(ii), as a reciplent of CAF Phase II support addresses of community anchor institutions to which began providi preceding calendar year.	shall provide the number, names, and	
<2021>	Interim Progress Community Anchor Institutions		
		Name of A	ttached Document Listing Required Information
-			

010>	Study Area Code Study Area Name	109010 Virgin Mobile USA LP
120>	Program Year	2015
130>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster
35>	Contact Telephone Number - Number of person identified in data line <030> Contact Email Address - Email Address of person identified in data line <030>	9137626107 ext,
039>	Contact email Address - Email Address to person identified in data mile close	andy.m.lancaster@sprint.com
HECK to		at to 47 CFR § 54,202(a)) and, for privately held carriers, ensuring compilance with the financial reporting requirements set forth in teleformation reported on this form and in the documents attached below is accurate.
010)	Progress Report on 5 Year Plan	
	Milestone Certification (47 CFR § 54.313(f)(1)(i))	
		Name of Attached Document Listing Required Information
011)	Please check this box to confirm that the attached document(s), on line 3 § \$4.313 (f)(1)(ii), the carrier shall provide the number, names, and addreproviding access to broadband service in the preceding calendar year.	1012 contains the required information pursuant to isses of community anchor institutions to which began
012)	Community Anchor Institutions (47 CFR § \$4.313(f)(1)(ii))	
		Name of Attached Document Listing Required Information
	Is your company a Privately Held ROR Carrier (47 CFR § \$4.313(f)(2)) if yes, does your company file the RUS annual report.	(Yes/No)
ase	check these boxes to confirm that the attached document(s), on line 3017	7, contains the required information pursuant to § 54.313(f)(2) compliance requires:
	Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)	
016)	Document(s) for Balance Sheet, Income Statement and Statement of Ca	sh Flows
1017)	If the response is yes on line $3014,$ attach your company's RUS annual report and all required documentation	_
		Name of Attached Document Listing Required Information (Yes/No.)
(018)	If the response is no on line 3014, is your company audited?	(165/10)
2021	If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains	
019)	Either a copy of their audited financial statement; or (2) a financial report in a fe	ormat comparable to RUS Operating Report for Telecommunications
020)	Document(s) for Balance Sheet, Income Statement and Statement of C	ash Flows
10000	Management letter issued by the independent certified public accountant that	Control of the contro
	If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:	5 C C C C C C C C C C C C C C C C C C C
1022)	Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications	
	Borrowers,	
1023)	Underlying information subjected to a review by an independent certified public accountant	H
1024)	Underlying information subjected to an officer certification.	
1025)	Document(s) for Balance Sheet, Income Statement and Statement of C.	ash Flows
	1	· · · · · · · · · · · · · · · · · · ·

\$1,000 \$110 \$100 \$790.50	tion - Reporting Carrier lection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	109010
<015>	Study Area Name	Virgin Mobile USA LP
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster
<035>	Contact Telephone Number - Number of person identified in data line <030>	9137626107 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	andy.m.lancaster@sprint.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate. Name of Reporting Carrier: Virgin Mobile USA LP Signature of Authorized Officer: CERTIFIED ONLINE Printed name of Authorized Officer: Jay Franklin Title or position of Authorized Officer: Assistant Controller Telephone number of Authorized Officer: 9137625987 ext. Study Area Code of Reporting Carrier: 109010 Filing Due Date for this form: 06/30/2014 Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

	oon - Agent / Cerrier ection Form	FCC Form 483 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	109010
<015>	Study Area Name	Virgin Mobile USA LP
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster
<035>	Contact Telephone Number - Number of person identified in data line <030>	9137626107 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	andy.m.lancaster@sprint.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

certify that (Name of Agent)_ also certify that I am an officer of the reporting carrier; r agent; and, to the best of my knowledge, the reports an	is authorized to submit the information reported on behalf of the reporting carrier. y responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized data provided to the authorized agent is accurate.
Name of Authorized Agent:	
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date:
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent	uthorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier
A	ized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided porting carrier; and, to the best of my knowledge, the information reported herein is accurate.
Name of Reporting Carrier:	
Name of Authorized Agent or Employee of Agent:	
Signature of Authorized Agent or Employee of Agent:	Date:
Printed name of Authorized Agent or Employee of Agent:	
Fitle or position of Authorized Agent or Employee of Agent	
Telephone number of Authorized Agent or Employee of Ag	t:
Study Area Code of Reporting Carrier:	Filing Due Date for this form:



5350057279300	erating Companies Inction Form			FCCForm 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	109010	_	
<015>	Study Area Name	Virgin Mobi	le USA LP	
<020>	Program Year	2015	N	
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. La	ıncaster	
<035>	Contact Telephone Number - Number of person identified in data line <030>	9137626107 6	xt.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	andy.m.lance	aster@sprint.com	
<810> <811> <812>	Reporting Carrier Virgin Mobile USA LF Holding Company Softbank Corp. Operating Company			1
<813>	Affiliates		SAC	CaS> Doing Business As Company or Brand Designation
	Virgin Mobile USA LP		109010	Assurance Wireless

#3763/F673/64URD	m 481 - Carrier Annual Reporting Data Collection Form		FET Form 4 CN/IS Contr July 2013	21 ol No. 3259-0385/CMS Control No. 3050-0619
<010>	Study Area Code	129005		e DAN ANTERES E REPORTAT DE PROPERTIE DE PROPERTIE DE L'ANTERES DE L'A
<015>	Study Area Name	Virgin Mobile USA	LP	
<020>	Program Year	2015		
<030>	Contact Name: Person USAC should contact with questions about this data	Andrew M. Lancaster		one and a supplied to the supp
<035>	Contact Telephone Number: Number of the person identified in data line <030>	9137626107 ext.		
<039>	Contact Email Address: Email of the person identified in data line <030>	andy.m.lancaster@sp	rint.com	*
ANNUA	L REPORTING FOR ALL CARRIERS			54.313 54.422 Completion Required (check box when complete)
<100>	Service Quality Improvement Reporting		(complete attached worksheet)	111111
<200>	Outage Reporting (voice)		(complete attached worksheet)	1
<210>	< check box if no	outages to report		William .
<300>	Unfulfilled Service Requests (voice)			PG 304 105 105 105 105 105 1
<310>	Detail on Attempts (voice)		(attach d	escriptive document)
<320>	Unfulfilled Service Requests (broadband)			
				- I known and
<330>	Detail on Attempts (broadband)		(attach	descriptive document)
<400>	Number of Complaints per 1,000 customers (voice)			
<410>	Fixed			
<420> <430>	Mobile 0.5518 Number of Complaints per 1,000 customers (broadb	and)		
<440>	Fixed	, and)		
<450>	Mobile			
<500>	Service Quality Standards & Consumer Protection Re	ules Compliance	(check to indicate certification)	
<510>	129005111510.pq1		(attached descriptive document)	
<600>	Functionality in Emergency Situations		(check to indicate certification)	/
	129005nh610.pdf		HE WAS AN ANGER CONTRACTOR OF THE STATE OF T	
<610>			(attached descriptive document)	
<700>	Company Price Offerings (voice)	(2.)	(complete attached worksheet)	
<710>	Company Price Offerings (broadband)		(complete attached worksheet)	
	Operating Companies and Affiliates		(complete attached worksheet)	THE REAL PROPERTY.
	Tribal Land Offerings (Y/N)? Voice Services Rate Comparability	(if)	es, complete attached worksheet) (check to indicate certification)	
12000-	The services have compared may			
<1010>			(attach descriptive document)	
	Terrestrial Backhaul (Y/N)?	(if	not, check to indicate certification)	
<1110>	Terms and Condition for Lifeline Customers		(complete attached worksheet)	
1200>	Price Cap Carriers, Proceed to Price Cap Additional I	Documentation Works	(complete attached worksheet)	A STATE OF THE STA
	Including Rate-of-Return Carriers affiliated with Pri			
<2000>	,		(check to indicate certification)	THE STATE OF THE PARTY.
<2005>	Pate of Poture Carriers Present to POR Addistrant	Documentation W.	(complete attached worksheet)	
<3000>	Rate of Return Carriers, Proceed to ROR Additional	Documentation Works	(check to indicate certification)	121111
<3005>			(complete attached worksheet)	111111

	rvice Quality improvement Reporting flection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	129005	-
<015>	Study Area Name	Virgin Mobile USA LP	
<020>	Program Year	2015	
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster	
<035>	Contact Telephone Number - Number of person identified in data line <030>	9137626107 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	andy.m.lancaster@aprint.com	7647 4
<110>	Has your company received its ETC certification from the FCC? If your answer to Line <110> is yes, do you have an existing \$54.202(a) "5"	(yes/no) O	- 111
<111>	year plan" filed with the FCC?	(yes / no) O O	
<112>	If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service. Attach Five-Year Service Quality Improvement Plan or, in subsequent years,		
10.0002	your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your of CETC which only receives frozen support, your progress report is only	company is a	
	required to address voice telephony service.		
	Please check these boxes below to confirm that the attached documents(s), on lit 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.	ne	Name of Attached Document
<113>	Maps detailing progress towards meeting plan targets		
:114>	Report how much universal service (USF) support was received		
115>	How (USF) was used to improve service quality		
116>	How (USF)was used to improve service coverage		
	How (USF) was used to improve service capacity		
:117>			

The State of the S	vice Outage Reporting (Voice) lection Form	FCC Form 481 OMB Control No. July 2013	3060-0986/OMB Control No. 3060-0819
<010>	Study Area Code	129005	
<015>	Study Area Name	Virgin Mobile USA LP	
<020>	Program Year	2015	5-44
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster	
<035>	Contact Telephone Number - Number of person identified in data line <030>	9137626107 ext.	2.000
<039>	Contact Email Address - Email Address of person identified in data line <030>	andy.m.lancaster@sprint.com	

100	<a>>	<b1></b1>	<b2></b2>	<63>	<b4></b4>	<c1></c1>	<c2></c2>	<d>></d>	<e></e>	<f></f>	<g></g>	<h></h>
	NORS Reference Number	Outage Start Date	Outage Start Time	Outage End Date	Outage End Time	Number of Customers Affected	Total Number of Customers	911 Facilities Affected (Yes / No)	Service Outage Description (Check all that apply)	Did This Outage Affect Multiple Study Areas (Yes / No)	Service Outage Resolution	Preventative Procedures
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	ce Offerings Including Voice Rate Date. lection form	FCC Ports 481 OMB Control No. 3660-0986/DMB Control No. 3660-0819
		July 2013
<010>	Study Area Code	129005
<015>	Study Area Name	Virgin Mobile USA LP
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster
<035>	Contact Telephone Number - Number of person identified in data line <030>	9137626107 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	andy.m.lancaster#sprint.com
<701>	Residential Local Service Charge Effective Date 1/1/2014	
<702>	Single State-wide Residential Local Service Charge	

State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	 <b3> State Subscriber Line Charge</b3>	LIFTH CONTROL PROPERTY CONTROL	Mandatory Extended Area Service Charge	Total per line Rates and Fer
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